

LEARN TO COMMUNICATE THROUGH THE TOUCH: Experiences of Nursing Students in Clinical Practice

Aida Abreu Serra¹; Luciane Lúcio Pereira²

¹ Nurse, PhD student, PhD in Nursing at the Catholic University, Health Sciences Institute in Lisbon and Associate Professor in the School of Health Sciences Egas Moniz. Almada. Portugal

² Nurse. PhD in Nursing, School of Nursing, University of São Paulo. Academic Dean and Professor of the Master's program in Nursing at the University Guarulhos. Collaborator Professor of ICS the Portuguese Catholic University. Deputy leader of the Research Group on Communication and Nursing EEUSP. Sao Paulo. Brazil

aidaabreuserra@gmail.com

Introduction:

In the context of Nursing, it is unthinkable this professional activity without considering the importance of the communicative aspect. The writing, speech, facial expressions, and touch are widely used forms of communication, consciously or not. One of the skills of the nurse is to decode and understand the meaning of the message that sends the patient, and from there, establish an appropriate and consistent care plan to their needs. For this, it must be alert to signs of verbal and non-verbal issued by the patient and received by nurses (Silva, 2003).

Nursing education and consequently the learning process of students, particularly in the context of practice, has been a major focus of our attention. This has been especially experienced in contact with the initial training situations.

For these students, if on one hand be in the workplace and perform activities "like a pro" is a challenge with enormous potential motivation for the first time towards the other and no less significant, they are in a learning situation and consequent evaluation in a context unfamiliar, but they know is demanding, challenging and complex, they realize that their actions can have consequences for the welfare of others, but also feel that the clinical education will require them a responsibility for which they do not know whether they are ready.

We have chosen to approach the first student experience in Clinical practice, because it is through him that the student contact first with the reality of the profession by establishing, the first contact with the patient and the disease situation, in which includes the physical and emotional suffering of the patient and family situations that induce the student significant changes in their way of thinking, living and being nurse.

The interest in studying this theme emerged to promote the follow-up of students from more comprehensively, advising them and preparing them for the difficulties that may arise in order to provide them moments of learning and motivating personal growth, with minimum of constraints and obstacles, especially with regard to communication through touch.

Arising from the above, the question came up: What are the experiences of the students during the first clinical education, touching sick people?

To answer this question we have formulated the following objective; Knowing the experiences of the students during the first clinical practice, touching sick people.

Methods:

It is an exploratory and descriptive study of a qualitative nature.

For the collection of data, we used a semi-structured interview, recorded on magnetic media to 24 students in the first year and 12 in the second year of the Course Degree in Nursing, School of Health Sciences Egas Moniz, the analysis was made through the technique of content analysis following the guidance proposed by Bardin (2009).

Results and discussion:

The analysis of the narrative reveals the experiences of nursing students in clinical education, with regard to their experiences by touching patients. When we designate experiences we refer to all

Nursing Interventions, either technical or relational, that students wanted to develop throughout the clinical practice.

As many common experiences for most students as positive experiences, in which we include a set of experiences considered by gratifying, pleasant, leading to moments of joy and satisfaction in the relationship with the patient including through touch as a way to calm and comfort.

Also within the positive experiences emerged to confirm the professional choice because some students still felt unsafe before their choice, but because of to the positive experiences during clinical practice considered to have been the right choice to ensure success throughout the course and their professional future.

Students who experienced unpleasant situations considered negative experiences, experienced embarrassment situations and anger, caused by inadequate attitudes of patients toward them, the frustration of experiences of students who were unable to communicate with the patient because of their pathology, were also considered negative experiences.

The new experiments led to several students' experiences of fear and insecurity, anxiety and nervousness related to the novelty of the first clinical education.

In the reports of students of 2nd year nursing found that these have matured with experience, they had passed through several clinical practice in which they were acquiring theoretical knowledge, they revealed a more mature because they have experienced numerous situations learned from experience to act in a suitable way for the sick person, either through verbal communication either through touch, for which it is very motivated, easily establishing this relationship with the patient.

Conclusions:

We can conclude that nursing students in the relationship with the patient or communication either by touch, experienced positive experiences, negative experiences, new experiences and we noticed that there were maturing with the experiences.

So the research and reflection on communication in nursing, touch learning as a way of communication and their importance to the nursing care, provided reinforced the understanding of the essence of the profession, highlighting aspects that become essential in the training process, more specifically those related to clinical practice as privileged spaces for formation, for acquisition of experiences, that contribute to the development of skills.

References:

Bardin, L. - *Content analysis*. Lisbon: Editions 70. 2009

Casate, JC; Correa, AK – *Experiences of nursing students in hospital training: subsidies for a reflection on humanization in health*. Journal of Nursing USP .; 40 (3): 321-8 2006

Freitas, P. & Terrasêca, M. - *Learning and assessment in clinical education. The theory of the three worlds*. Journal for Educators Teachers and Trainers, Vol. 4 (2), pp. 36 - 47. 2013

Silva, M.J.P - *Communication has remedy: communication in interpersonal relationships in health*. 8th ed. Sao Paulo: Loyola. 2003